

**STATEMENT OF ECONOMIC INTERESTS**

Date Received  
 Official Use Only

FAIR POLITICAL  
 PRACTICES COMMISSION  
**COVER PAGE**

11 APR -4 PM 12:32

**CITY OF MERCED**  
**FEB28'11AM10:55**

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Gabriault-Acosta		Michele	Ann

**1. Office, Agency, or Court**

Agency Name  
 City of Merced  
 Division, Board, Department, District, if applicable  
 City Council  
 Your Position  
 City Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: see attachment Position: Member

**2. Jurisdiction of Office (Check at least one box)**

<input type="checkbox"/> State	<input type="checkbox"/> Judge (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input checked="" type="checkbox"/> City of <u>Merced</u>	<input type="checkbox"/> Other _____

**3. Type of Statement (Check at least one box)**

<input checked="" type="checkbox"/> <b>Annual:</b> The period covered is January 1, 2010, through December 31, 2010. -or- The period covered is ____/____/____, through December 31, 2010.	<input type="checkbox"/> <b>Leaving Office:</b> Date Left ____/____/____ (Check one) <input type="radio"/> The period covered is January 1, 2010, through the date of leaving office. <input type="radio"/> The period covered is ____/____/____, through the date of leaving office.
<input type="checkbox"/> <b>Assuming Office:</b> Date ____/____/____	
<input type="checkbox"/> <b>Candidate:</b> Election Year _____ Office sought, if different than Part 1: _____	

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

<input type="checkbox"/> <b>Schedule A-1 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule C - Income, Loans, &amp; Business Positions</b> – schedule attached
<input checked="" type="checkbox"/> <b>Schedule A-2 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule D - Income – Gifts</b> – schedule attached
<input checked="" type="checkbox"/> <b>Schedule B - Real Property</b> – schedule attached	<input type="checkbox"/> <b>Schedule E - Income – Gifts – Travel Payments</b> – schedule attached

-or-

☐ **None - No reportable interests on any schedule**

I have used all reasonable diligence in preparing this statement. I have reviewed the herein and in any attached schedules is true and complete. I acknowledge this is  
 I certify under penalty of perjury under the laws of the State of California that

Date Signed February 25, 2011  
 (month, day, year)

Signature

(d)(5)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Gabriault-Acosta, Michele A.</u>

**▶ 1. BUSINESS ENTITY OR TRUST**

Name  
Michele Gabriault-Acosta

Address (Business Address Acceptable)  
701 West Olive Avenue, Merced, CA 95348

Check one

☐ Trust, go to 2     ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Real Estate Sales

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10     \_\_\_\_/\_\_\_\_/10  
ACQUIRED     DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship     ☐ Partnership     ☐ Other

YOUR BUSINESS POSITION Realtor

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499     ☒ \$10,001 - \$100,000  
☐ \$500 - \$1,000     ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT     ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10     \_\_\_\_/\_\_\_\_/10  
ACQUIRED     DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust     ☐ Stock     ☐ Partnership

☐ Leasehold     ☐ Other  
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2     ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10     \_\_\_\_/\_\_\_\_/10  
ACQUIRED     DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship     ☐ Partnership     ☐ Other

YOUR BUSINESS POSITION

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499     ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000     ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

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**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT     ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10     \_\_\_\_/\_\_\_\_/10  
ACQUIRED     DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust     ☐ Stock     ☐ Partnership

☐ Leasehold     ☐ Other  
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Gabriault-Acosta, Michele A.

► STREET ADDRESS OR PRECISE LOCATION

1228 West 22nd Street

CITY

Merced, California 95340

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☒ Family Trust

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

► STREET ADDRESS OR PRECISE LOCATION

1218 West 23rd Street

CITY

Merced, California 95340

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☒ Family Trust

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: \_\_\_\_\_

Offices/Agencies and Positions for  
Gabriault-Acosta, Michele A.

ATTACHMENT FOR 700 FORM :

City Council  
Flood Hazard Control Board  
Merced County Association of Governments  
Merced Industrial Development Authority  
Public Financing Authority  
Redevelopment Agency  
LAFCO